



STATE OF ARIZONA
**APPLICATION FOR CERTIFICATION
AS A PARTICIPATING CANDIDATE**

Pursuant to Arizona Revised Statutes §§16-947 and 948 and AAC R2-20-104 (D)

OFFICE USE ONLY

☒ Initial Application ☐ Amended Application

FILERID
2004-93050

NAME OF CANDIDATE <i>Doug Quelland</i>		OFFICE SOUGHT (include Legislative District, if applicable) <i>Rep. #10</i>	
ADDRESS (NUMBER & STREET) <i>3746 W Monte Cristo</i>		CITY <i>Phoenix</i>	STATE <i>AZ</i>
MAILING ADDRESS (if different from above) <i>15440 N 35th Ave</i>		CITY <i>Phx</i>	STATE <i>AZ</i>
CANDIDATE'S TELEPHONE # <i>(602) 918-8772</i>	CANDIDATE'S FAX # <i>(602) 918-8778</i>	CANDIDATE'S E-MAIL ADDRESS <i>Doug.quelland@cox.net</i>	
CANDIDATE'S PARTY AFFILIATION (if any) <i>Rep</i>			
NAME OF CANDIDATE'S COMMITTEE <i>Comm X Re Elect Doug Quelland</i>			
COMMITTEE'S ADDRESS <i>15440 N 35th Ave</i>		CITY <i>Phx</i>	STATE <i>AZ</i>
COMMITTEE'S PHONE # <i>(602) 918-8772</i>	COMMITTEE'S FAX # <i>(602) 918-8778</i>	COMMITTEE'S E-MAIL ADDRESS <i>same</i>	
NAME OF DESIGNATED INDIVIDUAL WITH AUTHORITY TO WITHDRAW FUNDS (IF APPLICABLE) (A.R.S. §16-948) <i>Doug Quelland</i>			
DESIGNATED INDIVIDUAL'S ADDRESS <i>same</i>		CITY	STATE
DESIGNATED INDIVIDUAL'S TELEPHONE # <i>same</i>	DESIGNATED INDIVIDUAL'S FAX # <i>same</i>	DESIGNATED INDIVIDUAL'S E-MAIL ADDRESS <i>same</i>	
LIST THE NAME OF THE FINANCIAL INSTITUTION FROM WHICH THE CANDIDATE AND THE DESIGNATED INDIVIDUAL WILL CONDUCT ALL FINANCIAL ACTIVITY FOR THE CANDIDATE'S CAMPAIGN COMMITTEE (do not list account number). (A.R.S. §16-948(A)). <i>B of A</i>			

DESIGNATED CANDIDATE'S STATEMENT (if applicable) (A.R.S. §16-948(B)): I hereby designate _____ as my duly authorized Designated Individual, with the authority to withdraw funds and make expenditures from my campaign account on my behalf.

Date: *1/15/04*

Candidate's signature: *Doug Quelland*